

Water Compliance Inspection Report

Section A: National Data System Coding (i.e., PCS)

Transaction Code		NPDES										yr/mo/day		Inspection Type		Inspector		Fac Type											
1	M	2	5	3	P	E	0	0	0	0	7	3	6	11	12	0	6	0	9	1	3	17	18	S	19	S	20	B	
Remarks																													
21																													
66																													
Inspection Work Days				Facility Self-Monitoring Evaluation Rating										BI		QA		Reserved											
67	0	0	1	69	70	3	71	F	72	N	73		74		75														
80																													

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) PINNACLE FOODS, P.O. BOX 625 MILLSBORO DE. 19966	Entry Time/Date 09:00	Permit Effective Date 12-1-00
	Exit Time/Date	Permit Expiration Date 11-30-05
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) BETH SISE (302) 934-3833	Other Facility Data (e.g., SIC NAICS, and other descriptive information)	
Name, Address of Responsible Official/Title/Phone and Fax Number RANDY SPENCE (302) 934-3841		

Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

Not Evaluated During Inspection		Check Only Those Areas Evaluated	
<input checked="" type="checkbox"/> Permit	<input type="checkbox"/> Self-Monitoring Program	<input type="checkbox"/> Pretreatment	<input type="checkbox"/> MS4
<input checked="" type="checkbox"/> Records/Reports	<input type="checkbox"/> Compliance Schedules	<input type="checkbox"/> Pollution Prevention	
<input checked="" type="checkbox"/> Facility Site Review	<input checked="" type="checkbox"/> Laboratory	<input checked="" type="checkbox"/> Storm Water	
<input checked="" type="checkbox"/> Effluent/Receiving Waters	<input checked="" type="checkbox"/> Operations & Maintenance	<input type="checkbox"/> Combined Sewer Overflow	
<input checked="" type="checkbox"/> Flow Measurement	<input checked="" type="checkbox"/> Sludge Handling/Disposal	<input type="checkbox"/> Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Phone and Fax Numbers	Date
<i>Allen V. McCloskey</i>	DNREC - (302) 739-9946	9-13-06
Signature of Management Q/A Reviewer	Agency/Office/Phone and Fax Numbers	Date
<i>[Signature]</i>	DNREC (302) 739-9946	10/23/06

ADDRESS OF PERMITTEE IF DIFFERENT FROM FACILITY (Including City, County and ZIP code)	DATE OF LAST PREVIOUS INVESTIGATION BY EPA/STATE 5-18-05
	FINDINGS —

(a) ADEQUATE RECORDS MAINTAINED OF:			
(i)	SAMPLING DATE, TIME, EXACT LOCATION	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> N/A
(ii)	ANALYSES DATES, TIMES	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> N/A
(iii)	INDIVIDUAL PERFORMING ANALYSIS	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> N/A
(iv)	ANALYTICAL METHODS/TECHNIQUES USED	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> N/A
(v)	ANALYTICAL RESULTS (e.g., consistent with self-monitoring report data)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> N/A

(f) RECORDS MAINTAINED OF MAJOR CONTRIBUTING INDUSTRIES (and their compliance status) USING PUBLICLY OWNED TREATMENT WORKS. DOGFISH HEAD BREWERY ☒ YES ☐ NO ☐ N/A

(i) ALL DISCHARGES ARE PERMITTED. ☒ YES ☐ NO ☐ N/A

10/ ANY HYDRAULIC AND/OR ORGANIC OVERLOADS EXPERIENCED. ☐ YES ☒ NO ☐ N/A

EPA FORM 2560-2 (8-77)

PERMIT NO.

DE 0000736

SECTION J - Compliance Schedules

PERMITTEE IS MEETING COMPLIANCE SCHEDULE. ☐ YES ☐ NO ☒ N/A (Further explanation attached _____)

CHECK APPROPRIATE PHASE(S):

- ☐ (a) THE PERMITTEE HAS OBTAINED THE NECESSARY APPROVALS FROM THE APPROPRIATE AUTHORITIES TO BEGIN CONSTRUCTION.
- ☐ (b) PROPER ARRANGEMENT HAS BEEN MADE FOR FINANCING (mortgage commitments, grants, etc.).
- ☐ (c) CONTRACTS FOR ENGINEERING SERVICES HAVE BEEN EXECUTED.
- ☐ (d) DESIGN PLANS AND SPECIFICATIONS HAVE BEEN COMPLETED.
- ☐ (e) CONSTRUCTION HAS COMMENCED.
- ☐ (f) CONSTRUCTION AND/OR EQUIPMENT ACQUISITION IS ON SCHEDULE.
- ☐ (g) CONSTRUCTION HAS BEEN COMPLETED.
- ☐ (h) START-UP HAS COMMENCED.
- ☐ (i) THE PERMITTEE HAS REQUESTED AN EXTENSION OF TIME.

SECTION K - Self-Monitoring Program

Part 1 - Flow measurement (Further explanation attached _____)

PERMITTEE FLOW MEASUREMENT MEETS THE REQUIREMENTS AND INTENT OF THE PERMIT. ☒ YES ☐ NO ☐ N/A

DETAILS:

- (a) PRIMARY MEASURING DEVICE PROPERLY INSTALLED. 90° V-Notch ☒ YES ☐ NO ☐ N/A
- TYPE OF DEVICE: ☐ WEIR ☐ PARSHALL FLUME ☐ MAGMETER ☐ VENTURI METER ☐ OTHER (Specify SONIC)
- (b) CALIBRATION FREQUENCY ADEQUATE. (Date of last calibration 5-8-06) ☒ YES ☐ NO ☐ N/A
- (c) PRIMARY FLOW MEASURING DEVICE PROPERLY OPERATED AND MAINTAINED. ☒ YES ☐ NO ☐ N/A
- (d) SECONDARY INSTRUMENTS (totalizers, recorders, etc.) PROPERLY OPERATED AND MAINTAINED. ☒ YES ☐ NO ☐ N/A
- (e) FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGES OF FLOW RATES. ☒ YES ☐ NO ☐ N/A

Part 2 - Sampling (Further explanation attached _____)

PERMITTEE SAMPLING MEETS THE REQUIREMENTS AND INTENT OF THE PERMIT. ☒ YES ☐ NO ☐ N/A

DETAILS:

- (a) LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES. ☒ YES ☐ NO ☐ N/A
- (b) PARAMETERS AND SAMPLING FREQUENCY AGREE WITH PERMIT. ☒ YES ☐ NO ☐ N/A
- (c) PERMITTEE IS USING METHOD OF SAMPLE COLLECTION REQUIRED BY PERMIT. ☒ YES ☐ NO ☐ N/A
IF NO, ☐ GRAB ☐ MANUAL COMPOSITE ☒ AUTOMATIC COMPOSITE FREQUENCY
- (d) SAMPLE COLLECTION PROCEDURES ARE ADEQUATE. ☒ YES ☐ NO ☐ N/A
- (i) SAMPLES REFRIGERATED DURING COMPOSITING TRFD ☐ YES ☒ NO ☐ N/A
- (ii) PROPER PRESERVATION TECHNIQUES USED ☒ YES ☐ NO ☐ N/A
- (iii) FLOW PROPORTIONED SAMPLES OBTAINED WHERE REQUIRED BY PERMIT ☒ YES ☐ NO ☐ N/A
- (iv) SAMPLE HOLDING TIMES PRIOR TO ANALYSES IN CONFORMANCE WITH 40 CFR 136.3 ☒ YES ☐ NO ☐ N/A
- (e) MONITORING AND ANALYSES BEING PERFORMED MORE FREQUENTLY THAN REQUIRED BY PERMIT. ☐ YES ☒ NO ☐ N/A
- (f) IF (e) IS YES, RESULTS ARE REPORTED IN PERMITTEE'S SELF-MONITORING REPORT. ☐ YES ☐ NO ☒ N/A

Part 3 - Laboratory (Further explanation attached _____)

PERMITTEE LABORATORY PROCEDURES MEET THE REQUIREMENTS AND INTENT OF THE PERMIT. ☒ YES ☐ NO ☐ N/A

DETAILS:

- (a) EPA APPROVED ANALYTICAL TESTING PROCEDURES USED. (40 CFR 136.3) ☒ YES ☐ NO ☐ N/A
- (b) IF ALTERNATE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED. ☐ YES ☐ NO ☒ N/A
- (c) PARAMETERS OTHER THAN THOSE REQUIRED BY THE PERMIT ARE ANALYZED. ☐ YES ☒ NO ☐ N/A
- (d) SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT. ☒ YES ☐ NO ☐ N/A
- (e) QUALITY CONTROL PROCEDURES USED. ☒ YES ☐ NO ☐ N/A
- (f) DUPLICATE SAMPLES ARE ANALYZED. 25 % OF TIME. ☒ YES ☐ NO ☐ N/A
- (g) SPIKED SAMPLES ARE USED. 100 % OF TIME. ☒ YES ☐ NO ☐ N/A
- (h) COMMERCIAL LABORATORY USED. ☒ YES ☐ NO ☐ N/A
- (i) COMMERCIAL LABORATORY STATE CERTIFIED. ☐ YES ☐ NO ☒ N/A

LAB NAME Envirocorp Inc.

LAB ADDRESS Harrington De.

PERMIT NO.

DE 0000 736

SECTION L - Effluent/Receiving Water Observations (Further explanation attached _____)

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	VISIBLE FLOAT SOL	COLOR	OTHER
001	No	No	No	No	No	TINT	—

(Sections M and N: Complete as appropriate for sampling inspections)

SECTION M - Sampling Inspection Procedures and Observations (Further explanation attached _____)

- ☒ GRAB SAMPLES OBTAINED
- ☒ COMPOSITE OBTAINED
- ☒ FLOW PROPORTIONED SAMPLE
- ☒ AUTOMATIC SAMPLER USED
- ☒ SAMPLE SPLIT WITH PERMITTEE
- ☒ CHAIN OF CUSTODY EMPLOYED
- ☒ SAMPLE OBTAINED FROM FACILITY SAMPLING DEVICE

COMPOSITING FREQUENCY 24 hr.

PRESERVATION ICED

SAMPLE REFRIGERATED DURING COMPOSITING: ☐ YES ☒ NO

SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE INDUSTRIAL

SECTION N - Analytical Results (Attach report if necessary)



STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES AND
ENVIRONMENTAL CONTROL
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY
DOVER, DELAWARE 19901

ENVIRONMENTAL
LABORATORY SECTION

PHONE: (302) 739-9942
FAX: (302) 739-3491

October 06, 2006

J. Chris Cleaver
DNREC - Division of Water Resources
89 Kings Highway
Dover, DE 19901

Attention: J. Chris Cleaver

Attached you will find the following Laboratory Results:

Order Number: 0609040
Project Description: Vlastic Foods Plant Millsboro
Date Received: 09/13/2006
Time Received: 13:45

If you have any questions regarding this data, please contact me at the above telephone number.

Sincerely,

Kathy A. Knowles
Laboratory Manager

Delaware's good nature depends on you!



ANALYSIS REPORT

ELS Sample Number:	0609040-001	Matrix:	Waste Water			
Client Sample Description:	001	Sampling Method:	Composite			
Site ID:	001	Date and Time Collected:	9/13/2006			
Test Parameter	Method	Result	Units	Qualifier	LOQ	Analysis Date
Inorganic Nonmetallic Constituents						
Phosphorus, Total, Alkaline Persulfate	EPA 365.1M	0.094	mg/L		0.010	09/21/2006
Ammonia as N, Total	EPA 350.1	0.092	mg/L		0.020	09/18/2006
Organic Aggregate Constituents						
BOD, 5-Day	SM 5210B	< 2.40	mg/L		2.40	09/14/2006
Physical and Aggregate Properties						
Residue, Nonfilterable (TSS)	EPA 160.2	6	mg/L		5	09/14/2006

ANALYSIS REPORT

ELS Sample Number:	0609040-002	Matrix:	Waste Water			
Client Sample Description:	001	Sampling Method:	Grab			
Site ID:	001	Date and Time Collected:	9/13/2006	11:00		
Test Parameter	Method	Result	Units	Qualifier	LOQ	Analysis Date
Microbiological Examination						
Enterococcus	SM 9230C	< 3	cfu/100mL		3	09/15/2006

ANALYSIS REPORT

ELS Sample Number:	0609040-003	Matrix:	Waste Water			
Client Sample Description:	001-1	Sampling Method:	Grab			
Site ID:	001-1	Date and Time Collected:	9/13/2006	11:01		
Test Parameter	Method	Result	Units	Qualifier	LOQ	Analysis Date
Microbiological Examination						
Enterococcus	SM 9230C	< 3	cfu/100mL		3	09/15/2006



Qualifier Codes, Definitions, and Abbreviations

Qualifier/Flag

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AB	Air Bubble in DO bottle
B	Compound not detected substantially (10 times) above the level reported in the laboratory blanks (For Chlorophyll & Pheophytin, blank value is at or below amount detected in sample).
BT	Bottom
C	See report narrative or comment line for observations concerning this result.
D	Sample diluted for analysis.
E	Value exceeds a theoretically equal or greater value (e.g. dissolved > total). However, the difference is within the expected precision of the analytical techniques and is not statistically significant.
EG	Value exceeds a theoretically equivalent or greater value (e.g. dissolved > total).
FZ	Samples frozen prior to analysis
I	The reported value is estimated due to the presence of interference.
IM	Instrument malfunctioned; No measurement taken.
J	Analyte present; reported value is estimated; concentration is below the range for accurate quantitation (greater than the MDL, but less than the LOQ).
JH	Result is likely overestimated due to matrix effect
JL	Result is likely underestimated due to matrix effect
K	Sample not analyzed for the dissolved metal. The Total metal result is below the lower quantitation limit.
LOQ	Limit of Quantitation
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PMM	Par Meter Malfunction
QC	Quality control value is outside acceptance limits.
QNS	Quantity not sufficient. Not enough sample to perform requested analyses.
S	Results will be reported in a separate report; See attached report.
SD	Sample discarded; Sample collected but not analyzed as per client request.
SNF	Site has no flow (i.e. a dry stream or a stream with no velocity)
STD	Stream too deep
STS	Site is too shallow to sample
U	Compound was analyzed but not detected. The method detection limit is reported.
UR	Nothing unusual was noted during the analysis of this sample. However, the test result differs from the norm to an extent that the laboratory considers it unreliable.
V	Analysis performed after holding time expired.
X	Results were not available at the time of the release of the report. Results will be reported when available.

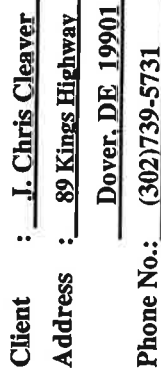


Qualifier Codes, Definitions, and Abbreviations

Units

CFS	Cubic Feet per Second.
cfu/100mL	Colony forming units per 100 mL.
G	gram; there are 1000 g in 1 Kg.
GPM	Gallons per minute.
IN	Inches.
Kg	Kilogram.
L	Liter.
mg	milligram; there are 1000 mg in 1 g.
MGD	Millions of Gallons per Day.
ml	milliliter; there are 1000 ml in 1 L.
NTU	Nephelometric Turbidity Units. NTU is numerically equivalent to Formazin turbidity unit (FTU).
oC	Celsius.
pCi/L	Pico curie per liter.
ppb	Parts per billion=ug/Kg, ug/L.
ppm	Parts per million=mg/Kg, ug/g, mg/L, ug/ml; 1 ppm=1000 ppb.
su	Standard Units.
ug	microgram; there are 1000 ug in 1 mg.
uL	microliter; there are 1000 ul in 1 mL.
uMhos	Conductivity units for laboratory measurements.
uS	micro siemens; units used to measure conductivity in the field; same as uMhos.

*Environmental Laboratory Section - Division of Water Resources
Department of Natural Resources and Environmental Control
89 Kings Highway, Dover, DE 19901 (302) 739-4771*

Page 1 of 1

Client : I. Chris Cleaver

Address : 89 Kings Highway

Dover, DE 19901

Phone No.: (302)739-5731

J. Chris Cleaver

J. Chris Cleaver

NPDES

0109040

[illegible]**ELS USE ONLY**

Sample Conditions (circle response):

1. Samples match COC? ☒ Yes/☐ No 2. Bottles supplied by ELS? ☒ Yes/☐ No 3. Samples received broken/leaking? Yes/☒ No 4. Cooler temp bottle 2-6 degrees? Yes/☒ No/NA 5. Properly preserved? ☒ Yes/☐ No 6. VOA/DO containers free of headspace? Yes/☒ No/NA 7. Holding times expired? Yes/☒ No 8. Volume sufficient for analysis? ☒ Yes/☐ No

Coc:040101



*Environmental Laboratory Section - Division of Water Resources
Delaware Department of Natural Resources and Environmental Control
89 Kings Highway, Dover, DE 19901 Phone: 302-739-9942*

INVOICE

Invoice To:

J. Chris Cleaver
Surface Water Discharge Section - NPDES
DNREC - Division of Water Resources
89 Kings Highway
Dover, DE 19901

Report To:

J. Chris Cleaver
Surface Water Discharge Section - NPDES
DNREC - Division of Water Resources
89 Kings Highway
Dover, DE 19901

Invoice ID:	Account:	ELS Contact:	Invoice Date:	Priority:
IN2297	DWR-NPDES	DFARIES	11-Oct-06	Normal
Order ID:	Project Name:	Date Received:		
0609040	Vlasic Foods Plant Millsboro	13-Sep-06		
Matrix:	Description:	Quantity:	Unit Price:	Extended Price:
Waste Water	Residue, Nonfilterable (TSS)	1	\$11.00	\$11.00
Waste Water	Phosphorus, Total, Alkaline Persulfate	1	\$20.00	\$20.00
Waste Water	Enterococcus	2	\$25.00	\$50.00
Waste Water	BOD, 5-Day	1	\$22.00	\$22.00
Waste Water	Ammonia as N, Total	1	\$19.00	\$19.00

Thank you for allowing us to serve you

Total: \$122.00



HORNEY INDUSTRIAL ELECTRONICS

Process Control Technology

CALIBRATION
WORKSHEET

No 000168

P.O. Box 700 Bridgeville, DE 19933
Phone (302) 337-3600 Fax (302) 337-8560

Customer Name Vlastic	Customer PO No. 710019641
Address	Account No. BETH
City, State, Zip	Date 5/9/2006
Job Description Calibration	Terms Net 20

Manufacturer	Serial Number	Range	Departure
F/P 10D1475YN14P (3" TUBE)	97W037446	0-250 GPM	$\pm 5\%$
FAILED DUE TO BAD STATIC CHECK - COILS SUPPOSE TO BE $5\frac{1}{2} \Omega \pm 20\%$ & THEY MEASURED 17.4 Ω			
F/P 1392 CHART RECORDER	9709-76736-C03	0-250 GPM	$\pm 5\%$
EFFLUENT CHAMBER			
F/P 1392 WITH ULTRA-SONIC	9411-40025-B03	0-500 GPM	$\pm 2\%$
F/P ULTRASONIC	8056040401-B03	0-500 GPM	—
2 = 2985 SPAN = 0870 TOT = 7625 FLUME = 6			
E&H FMU 861	8AR0009 EP40	0-500 GPM	$\pm 1\%$
F/P 1392 C/R	9508-51045-C03	0-1200 GPM	$\pm .25\%$
F/P ULTRA-SONIC	8056040401-C03	0-1200 GPM	—
2 = 4073			
NOTE: QUOTE 3" MAG TO REPLACE SPRAY IRRIGATION F/P METER			

Comments	Hours
CALIBRATED AS PER MANUFACTURERS SPECS	
	MIN BILLING
	1 TRIP

Service Engineer

Customer Signature

Date

Above work was completed to our satisfaction

siseb@pinnaclefoodcorp.com



STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
& ENVIRONMENTAL CONTROL
DIVISION OF WATER RESOURCES
89 KINGS HIGHWAY, P.O. BOX 1401
DOVER, DELAWARE 19903

Surface Water Discharges Section

Phone: (302) 739-5731

Fax: (302) 739-3491

SECTION 4.04 REPORT

NAME OF WASTEWATER
TREATMENT FACILITY:

Pinnacle Foods Corporation

ADDRESS OF WASTEWATER
TREATMENT FACILITY:

PO box 625

Millsboro DE 19966

NAME OF OWNER:

Pinnacle Foods Corporation

ADDRESS OF OWNER:

6 Executive Campus

Cherry Hill NJ 08002-7100

TYPE OF PLANT OR TYPE OF
UNIT PROCESSES OPERATED:

Activated Sludge: Step feed flow, equalization,
clarifier, sand filters, UV disinfection, sludge
digestion, sludge storage & seasonal spray irrigation

PLANT SIZE: DESIGN FLOW:

0.500

MGD

AVERAGE DAILY FLOW:

0.300

MGD

OPERATORS IN DIRECT
RESPONSIBLE CHARGE:

NAME

AREAS OF PLANT
RESPONSIBILITY

Beth B. Siro

Overall

Robert Lynch

Process Control &
solids handling

OTHER OPERATORS

NAME

AREAS OF PLANT
RESPONSIBILITY

1/6/06

Date

R. Spence

PLANT OPERATIONS MANAGER

Responsible Official

Delaware's good nature depends on you!



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ENVIRONMENTAL
LABORATORY SECTION

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